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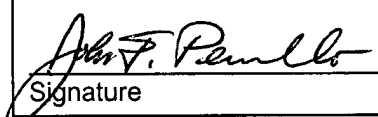
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030204

UTILITY PATENT APPLICATION TRANSMITTAL UNDER 37 C.F.R. 1.53(b)

Attorney Docket Number	HM-04-PT-02-NP
Applicants	Phillip B. Dolliver, Mark E. Saunders, Alec Bobroff
Title	Surgical Wound Drain Tube With Flow Control Safeguards
PRIORITY INFORMATION:	
NONE	
SMALL ENTITY STATUS:	
Applicant does not claim small entity status under 37 C.F.R. §1.27.	
APPLICATION ELEMENTS:	
Cover sheet	1 page
Specification	13 pages
Claims	3 pages
Abstract	1 page
Drawings	6 sheets
Combined Declaration and Power of Attorney, which is: <input type="checkbox"/> Unsigned; <input checked="" type="checkbox"/> Newly signed for this application; <input type="checkbox"/> A copy from prior application [**SERIAL NUMBER**] and the entire disclosure of the prior application is considered as being part of the disclosure of this new application and is hereby incorporated by reference therein.	2 pages
Preliminary Amendment	[**] pages
Information Disclosure Statement	[**] pages
Form PTO 1449	[**] pages
Cited References	[**] references
Recordation Form Cover Sheet and Assignment	[**] pages
English Translation	[**] pages
Certified Copy of Priority Document	[**] pages
Non-publication Request under 35 U.S.C. § 122(b).	[**] pages

Request for Deferral of Examination under 37 C.F.R. § 1.103(d)	[**] pages
Return Receipt Postcard	1
FILING FEES:	
Basic Filing Fee: \$770/\$385	\$770
Excess Claims Fee: (11-20)= 0 x \$18/\$9	\$****
Excess Independent Claims Fee: (4 -3)= 1 x \$86/\$43	\$86
Multiple Dependent Claims Fee: \$290/\$145	\$****
Total Fees:	\$856
X Enclosed is a check for \$856.00 to cover the total fees. <input type="checkbox"/> Charge [**AMOUNT**] to Deposit Account No. _____ to cover the total fees. <input type="checkbox"/> The filing fee is not being paid at this time. <input type="checkbox"/> Please apply any other charges or any credits to Deposit Account No. _____.	
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APPLICATION
FOR
UNITED STATES LETTERS PATENT

APPLICANTS

: Phillip B. Dolliver
Mark E. Saunders
Alec Bobroff

TITLE

: **SURGICAL WOUND DRAIN TUBE WITH FLOW
CONTROL SAFEGUARDS**